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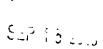
(Requestor's Name)			
(Address)			
(100.000)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Burnett 3D LLC				
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.			
Please return all correspondence concerning th	nis matter to the following:			
Lisa Burnett				
Name of Person				
Burnett 3D LLC				
Firm/Company				
9555 SW 67th Ave				
Address				
Hampton FL 32044				
City/State and Zip Code				
lisaburnett82@yahoo.com				
E-mail address: (to be used for future and	nual report notification)			
For further information concerning this matter	, please call:			
Lisa Burnett	at (832) 229-5657			
Name of Person	Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:				
☐ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy			

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	lame of the limited liability company:	LC	
		(b)	
(~)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	9555 SW 67th Ave		
	Hampton FL 32044		
	April 18, 2023	L230	000191887
3.	Date of filing/registration in Florida	4.	Document number
5. (a	N		
5. (a	Registered Agent and Registered Office shown on the records of	the Florida Dept.	of State:
	US Corp Agents		~ ?
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	-
	476 Riverside Ave		
	Jacksonville	32202	
	, FL	·	•
(b)			**
ζ-,	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	٥
	Lisa Burnett		
	NEW Registered Office Address:		
	9555 SW 67th Ave		
	Hampton, FI	32044	
the chagent was/w the ar Sign I here provise the obto mei	limited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members except the organization or the operating agreement of the atture of a member or authorized representative of a member serious of all statutes relative to the proper and complete organizations of my position as registered agent as provide rely reflect a change in the registered office address, I call in writing of this change.	f the registered ability compared the limited limited liability control of the limited liability compared liability	I office and the business office of the registered by, it is hereby confirmed that the change(s) iability company or as otherwise provided in ty company. L(Sa Burne H Printed or typed name of signee is capacity. I further agree to comply with the
	ure of Registered Agent		